## S IT

Ms. Emily Buchanan

Signature

CHEDULE E (FEC Form 3X)		
EMIZED INDEPENDENT EXPENDITURES		PAGE 3228 OF 3254 FOR LINE 24 OF FORM 3X
AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Nomen Speak Out PAC		C C00530766
heck if 24-hour report 48-hour report New report	ort Amends report file	led on Man / Dab / Yayayay
Full Name of Payee Colton R Overcash		Date of Public Distribution/Dissemination  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 121 Ohara Dr		Amount
City State	Zip Code	38.70
Salisbury NC	28147	Transaction ID: 605d4f53-60b1-4b9f-9 Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Off	fice Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Dis 201	sbursement For:  Primary General  14  Runoff  Contact Runoff
Full Name of Payee  Jessica R Resendiz		Date of Public Distribution/Dissemination
Mailing Address 9685 Paula St		11 15 2014 Amount
Citato	Zin Codo	50.00
City State Keithville LA	Zip Code 71047	Transaction ID: 8539f623-9943-4c84-b Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 15 2014
Name of Federal Candidate	Support Off	ffice Sought: House District: 00
Ms. Mary L Landrieu	∑ Oppose [	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		sbursement For:  Primary  General  Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures		88.70
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······································	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

25 [Electronically Filed] 06 2015 Date